Case 25-12097-amc Doc 4 Filed 05/27/25 Entered 05/27/25 16:49:44 Desc Main Document Page 1 of 3

Fill in this information to identify your case:						
Debtor 1	Telaria	Lynn	Hawthorne			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankru	ptcy Court for the:	Eastern District of Pennsylvania				
Case number						
(if known)		_				

Check as dire	ected in lines 17 and 21:
According to Statement:	the calculations required by this
1. Disposunder 11	able income is not determined J.S.C. § 1325(b)(3).
	able income is determined J.S.C. § 1325(b)(3).
☑ 3. The co	mmitment period is 3 years.
4. The co	mmitment period is 5 years.
Check if t	nis is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Pa	rt 1: Calculate Your Average Monthly Income						
1.	1. What is your marital and filing status? Check one only. ✓ Not married. Fill out Column A, lines 2-11. ☐ Married. Fill out both Columns A and B, lines 2-11.						
Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case.11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.							
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.	 Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). 				\$6,358.04		
3.	3. Alimony and maintenance payments. Do not include payments from a spouse.				\$0.00		
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.					\$0.00		
5.	Net income from operating a business, profession, or						
	farm	Debtor 1 \$0.00	Debtor 2 \$0.00				
	Gross receipts (before all deductions)	\$0.00	\$0.00				
	Ordinary and necessary operating expenses Net monthly income from a business, profession, or farm	\$0.00	\$0.00	Copy here –	\$ 0.00		
6.	Net income from rental and other real property	Debtor 1	Debtor 2				
	Gross receipts (before all deductions)	\$0.00	\$0.00				
	Ordinary and necessary operating expenses	\$0.00 -	\$0.00				
	Net monthly income from rental or other real property	\$0.00	70.00	Copy here –	\$0.00		

Debtor 1	Telaria	Lynn	Hawthorne	Case i	number (if known)	
	First Name	Middle Name	Last Name		, ,	
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
7. Interest,	dividends, and roya	lties		\$0.00		_
8. Unemplo	yment compensatio	n		\$0.00	-)	
Do not er	nter the amount if you	u contend that the amo	unt received was a benefit und	der	-	_
the Socia	al Security Act. Instea	d, list it here:				
For y	ou		\$	0.00		
For y	our spouse		·····			
under the include a States Go death of a under character the	e Social Security Act. ny compensation, pe overnment in connec a member of the unif- apter 61 of title 10, the amount of retired	Also, except as stated ansion, pay, annuity, or tion with a disability, coormed services. If you nen include that pay on	imount received that was a ber in the next sentence, do not allowance paid by the United imbat-related injury or disability received any retired pay paid by to the extent that it does not distributed of that title.	y, or	<u> </u>	_
10. Income not inclu a victim terrorism States 0	from all other source ide any benefits rece of a war crime, a crime, or compensation, procompensation, proco	es not listed above. Soived under the Social Some against humanity, opension, pay, annuity, oction with a disability, offormed services. If necessity	pecify the source and amount. Security Act; payments receive r international or domestic or allowance paid by the United combat-related injury or disabilitiessary, list other sources on a	d as d ity, or		
						_
Total amo	ounts from separate p	pages, if any.		+	+	<u>-</u> -
		e monthly income. Add or Column A to the tota	l lines 2 through 10 for each I for Column B.	\$6,358.04	+	= \$6,358.04 Total average monthly income
Part 2: De	termine How to N	Measure Your Dedu	actions from Income			
12. Copy yo	our total average mo	nthly income from line) 11			\$6,358.04
13. Calculat	te the marital adjusti	ment. Check one:				
√ You are	e not married. Fill in 0) below.				
You are	e married and your sp	oouse is filing with you.	Fill in 0 below.			
☐ You are	e married and your sp	pouse is not filing with	you.			
	ependents, such as p		olumn B, that was NOT regular tax liability or the spouse's sup			
	specify the basis for nal adjustments on a		and the amount of income dev	oted to each purpose. If nec	essary, list	
If this a	idjustment does not a	apply, enter 0 below.				
				+		^
Total				\$0.00 Co	py here. $ ightarrow$	- \$0.00
14. Your cu	rrent monthly incom	e. Subtract the total in	line 13 from line 12.			\$6,358.04

Debtor 1	Telaria	Lynn	Hawthorne	Case number (if known)	
	First Name	Middle Name	Last Name	, , ,	
15. Calculate	your current mon	thly income for the yea	ar. Follow these steps:		
15a. Cop	y line 14 here \longrightarrow .				\$6,358.04
Multi	ply line 15a by 12	(the number of months	in a year).		x 12
15h The	regult is your curre	ant monthly income for	the year for this part of the form		\$76,296.48
TOD. THE	Tesuit is your curre	ent monthly income for	the year for this part of the form.		
	_		you. Follow these steps:		
16a. Fill i	n the state in whicl	n you live.	Pennsylva	<u>nnia</u>	
16b. Fill i	n the number of pe	eople in your household	2	<u></u>	
16c. Fill i	n the median famil	y income for your state	and size of household		\$83,249.00
To fir	nd a list of applicab	le median income amo	ounts, go online using the link speaxailable at the bankruptcy clerk's	ecified in the separate	
17. How do th	e lines compare?				
17a. 1	Line 15b is less t	nan or equal to line 16d	c. On the top of page 1 of this form	m, check box 1, <i>Disposable income is not determin</i>	ned under 11
	U.S.C. § 1325(b)	(3). Go to Part 3. Do N	OT fill out <i>Calculation of Your Dis</i>	sposable Income (Official Form 122C-2).	
17b. 🖵	1325(b)(3). Go to		culation of Your Disposable Inco	ox 2, Disposable income is determined under 11 tome (Official Form 122C-2). On line 39 of that form	
Part 3: Calc	ulate Your Com	mitment Period Ur	nder 11 U.S.C. §1325(b)(4)		
18. Copy you	r total average mo	nthly income from line	e 11		\$6,358.04
				ing with you, and you contend that t part of your spouse's income, copy the	<u></u>
amount fro					
19a. If the r	narital adjustment	does not apply, fill in 0	on line 19a		\$0.00
19b. Subtra	act line 19a from li	ne 18.			\$6,358.04
20. Calculate	your current mon	thly income for the yea	ar. Follow these steps.		
20a. Copy lii	ne 19b				\$6,358.04
Multiply	by 12 (the number	er of months in a year).			x 12
20b. The res	sult is your current	monthly income for the	year for this part of the form.		\$76,296.48
20c. Copy th	e median family in	come for your state an	d size of household from line 16c	<u> </u>	\$83,249.00
21. How do th	e lines compare?			_	
☑ Line 20b	is less than line 2	0c. Unless otherwise of 3 years. Go to Part 4.	ordered by the court, on the top of	f page 1 of this form, check box 3,	
Line 20b	is more than or e	-		on the top of page 1 of this form,	
Part 4: Sign	Below				
By signing	here, under penalt	y of perjury I declare th	at the information on this stateme	ent and in any attachments is true and correct.	
X /s/	Telaria Lynn H	awthorne			
Sigr	nature of Debtor 1				
Date	e 05/27/2025 MM/ DD/ YYYY				
	20, 1111				
-		II out or file Form 1220			
If you checl	ked 17b, fill out Fo	rm 122C–2 and file it w	rith this form. On line 39 of that fo	orm, copy your current monthly income from line 14	4 above.